Case 23-12714-mdc Doc 14 Filed 10/16/23 Entered 10/16/23 22:22:12 Desc Mai Document Page 1 of 30

Fill in this information to identify your case and this filing:				
Debtor 1	Hady Traore			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for 23-12714	the: Eastern District of Pe	ennsylvania	▼

Official Form 106A/B

Schedule A/B: Property

12/15

☐ Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ■ No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home 7120 Guyer Ave. Creditors Who Have Claims Secured by Property. ■ Duplex or multi-unit building Street address, if available, or other description ☐ Condominium or cooperative Current value of the Current value of the Manufactured or mobile home entire property? portion you own? 158900.00 ☐ Land _158,900.00 Investment property Philadelphia PΑ 19153 Describe the nature of your ownership ■ Timeshare State ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Fee Simple Debtor 1 only Philadelphia Debtor 2 only County Check if this is community property Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home Creditors Who Have Claims Secured by Property. ☐ Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the portion you own? ■ Manufactured or mobile home entire property? Land ■ Investment property Describe the nature of your ownership City ZIP Code State interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: _

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What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: ☐ Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description ☐ Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? ■ Manufactured or mobile home ☐ Land ■ Investment property Describe the nature of your ownership State ☐ Timeshare City ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Check if this is community property ☐ Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: _ 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 158900.00 you have attached for Part 1. Write that number here. Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ✓ No ☐ Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.1 Make: the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: ☐ At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions)

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Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.3. Make: the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Debtor 1 only Model: Debtor 2 only Year: Current value of the
Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: ☐ At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the ☐ Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: ☐ At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ✓ No ☐ Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 4.1. Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 4.2. Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Other information: At least one of the debtors and another ☐ Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages 0.00 you have attached for Part 2. Write that number here

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6,500.00

Debtor 1

Part 3: Describe Your Personal and Household Items Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ✓ Yes. Describe....... Household goods and furnishings 3,000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games Yes. Describe.......... Computer, printer, cell phone 1,500.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ✓ No ☐ Yes. Describe...... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ✓ No ☐ Yes. Describe..... \$ 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe...... \$_ 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☑ Yes. Describe........... Clothing 1.500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No 500.00 Yes. Describe...... Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ No ☐ Yes. Describe...... 14. Any other personal and household items you did not already list, including any health aids you did not list ✓ No ☐ Yes. Give specific information.

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached

for Part 3. Write that number here

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Part 4: Describe Your Financial Assets Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No **☑** Yes..... 100.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No **☑** Yes..... Institution name: Beneficial Bank 475.32 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **☑** No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **☑** No Name of entity: % of ownership: ☐ Yes. Give specific 0% % information about 0% % them..... 0% %

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Negotiable instruments Non-negotiable instrume	nts are those you cannot transfer to someone by signing o	r delivering them.	
☑ No			
☐ Yes. Give specific	Issuer name:		
information about them			\$
			- \$
			- \$
. Retirement or pension		an ath an a anaism an anafit ab aring ma	
No	A, ERISA, Keogh, 401(k), 403(b), thrift savings accounts,	or other pension or profit-sharing pla	ins
Yes. List each			
account separately.	Type of account: Institution name:		
	401(k) or similar plan:		\$
			 \$
	·		
	IRA:		\$
	Retirement account:		\$
	Keogh:		\$
	Additional account:		\$
	Additional account:		
Your share of all unused	Additional account:	e or use from a company	
Your share of all unused Examples: Agreements	Additional account: repayments deposits you have made so that you may continue service	e or use from a company	
Your share of all unused Examples: Agreements companies, or others	Additional account: repayments deposits you have made so that you may continue service	e or use from a company	
Your share of all unused Examples: Agreements companies, or others No	Additional account: repayments deposits you have made so that you may continue service with landlords, prepaid rent, public utilities (electric, gas, was	e or use from a company	
Your share of all unused Examples: Agreements companies, or others No	Additional account: repayments deposits you have made so that you may continue service with landlords, prepaid rent, public utilities (electric, gas, was institution name or individual:	e or use from a company	- \$
Your share of all unused Examples: Agreements companies, or others No	Additional account: repayments deposits you have made so that you may continue service with landlords, prepaid rent, public utilities (electric, gas, was institution name or individual:	e or use from a company	
Your share of all unused Examples: Agreements companies, or others No	Additional account: repayments deposits you have made so that you may continue service with landlords, prepaid rent, public utilities (electric, gas, was institution name or individual: Electric: Gas: Heating oil:	e or use from a company ater), telecommunications	- \$ - \$ - \$ - \$
Your share of all unused Examples: Agreements companies, or others No	Additional account: repayments deposits you have made so that you may continue service with landlords, prepaid rent, public utilities (electric, gas, was institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit:	e or use from a company ater), telecommunications	- \$
Your share of all unused Examples: Agreements companies, or others No	Additional account: repayments deposits you have made so that you may continue service with landlords, prepaid rent, public utilities (electric, gas, was institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent:	e or use from a company ater), telecommunications	- \$ - \$ - \$ - \$ - \$ - \$
Your share of all unused Examples: Agreements companies, or others No	Additional account: repayments deposits you have made so that you may continue service with landlords, prepaid rent, public utilities (electric, gas, was institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone:	e or use from a company ater), telecommunications	- \$
Your share of all unused Examples: Agreements companies, or others No	Additional account: repayments deposits you have made so that you may continue service with landlords, prepaid rent, public utilities (electric, gas, was a linstitution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water:	e or use from a company ater), telecommunications	- \$
Your share of all unused Examples: Agreements companies, or others No	Additional account: repayments deposits you have made so that you may continue service with landlords, prepaid rent, public utilities (electric, gas, was institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture:	e or use from a company ater), telecommunications	- \$ \$
Your share of all unused Examples: Agreements companies, or others No	Additional account: repayments deposits you have made so that you may continue service with landlords, prepaid rent, public utilities (electric, gas, was a linstitution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water:	e or use from a company ater), telecommunications	- \$
Your share of all unused Examples: Agreements companies, or others ☑ No ☐ Yes	Additional account: repayments deposits you have made so that you may continue service with landlords, prepaid rent, public utilities (electric, gas, was institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other:	e or use from a company ater), telecommunications	- \$ \$
Your share of all unused Examples: Agreements companies, or others No Yes	Additional account: repayments deposits you have made so that you may continue service with landlords, prepaid rent, public utilities (electric, gas, was institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture:	e or use from a company ater), telecommunications	- \$ \$
Examples: Agreements companies, or others No Yes	Additional account: repayments deposits you have made so that you may continue service with landlords, prepaid rent, public utilities (electric, gas, was a linstitution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: a periodic payment of money to you, either for life or for a	e or use from a company ater), telecommunications	- \$ \$
Your share of all unused Examples: Agreements companies, or others No Yes	Additional account: repayments deposits you have made so that you may continue service with landlords, prepaid rent, public utilities (electric, gas, was institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other:	e or use from a company ater), telecommunications	\$\$ - \$\$ - \$\$ - \$\$ - \$\$ - \$\$ - \$\$
Your share of all unused Examples: Agreements companies, or others No Yes 3. Annuities (A contract for No	Additional account: repayments deposits you have made so that you may continue service with landlords, prepaid rent, public utilities (electric, gas, was a linstitution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: a periodic payment of money to you, either for life or for a	e or use from a company ater), telecommunications	- \$ \$

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26 U	.S.C. §§ 530(b)(1), 529A(b), a	an account in a qualified ABLE program, or under a qualified state and $529(b)(1)$.	e tuition program.	
□ γ	/	stitution name and description. Separately file the records of any interes	sts.11 U.S.C. § 521(c):	
				\$
				\$
				\$
				Φ
25. Trust	ts, equitable or future intere cisable for your benefit	ests in property (other than anything listed in line 1), and rights or	powers	
	No			
	es. Give specific			•
ir	nformation about them			\$
	mples: Internet domain names	s, trade secrets, and other intellectual property s, websites, proceeds from royalties and licensing agreements		
	es. Give specific			
ir	nformation about them			\$
	nses, franchises, and other	general intangibles sive licenses, cooperative association holdings, liquor licenses, profess	sional licenses	
		g,, r, r		
	es. Give specific			
	nformation about them			\$
Money o	or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
				portion you own? Do not deduct secured
28. Tax r	refunds owed to you			portion you own? Do not deduct secured
28. Tax r	refunds owed to you			portion you own? Do not deduct secured claims or exemptions.
28. Tax r	refunds owed to you No Yes. Give specific information about them, including who		Federal: \$_	portion you own? Do not deduct secured claims or exemptions.
28. Tax r	refunds owed to you No Yes. Give specific information about them, including who	rns	Federal: \$_ State: \$_	portion you own? Do not deduct secured claims or exemptions.
28. Tax r	refunds owed to you No Yes. Give specific information about them, including who	rns		portion you own? Do not deduct secured claims or exemptions.
28. Tax r 28. Tax r N Y 29. Fam i Exam	refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years	rns	State: \$_Local: \$_	portion you own? Do not deduct secured claims or exemptions.
28. Tax r 28. Tax r N Y 29. Famile Exam	refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settleme	State: \$_Local: \$_	portion you own? Do not deduct secured claims or exemptions.
28. Tax r 28. Tax r N Y 29. Famile Exam	refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settleme	State: \$_ Local: \$_ ent, property settlement	portion you own? Do not deduct secured claims or exemptions.
28. Tax r 28. Tax r N Y 29. Famile Exam	refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settleme	State: \$_Local: \$_	portion you own? Do not deduct secured claims or exemptions.
28. Tax r 28. Tax r N Y 29. Famile Exam	refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settleme	State: \$_ Local: \$_ ent, property settlement Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions.
28. Tax r 28. Tax r N Y 29. Famile Exam	refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settleme	State: \$_ Local: \$_ ent, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$
28. Tax r 28. Tax r N Y 29. Famile Exam	refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settleme	State: \$_ Local: \$_ ent, property settlement Alimony: Maintenance: Support: Divorce settlement:	portion you own? Do not deduct secured claims or exemptions.
28. Tax r 29. Fami Exam Y	refunds owed to you No Yes. Give specific information about them, including whyou already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settleme	State: \$_ Local: \$_ ent, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$
28. Tax r N Y 29. Fami Exan V N Y 30. Othe	refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settleme	State: \$_ Local: \$_ ent, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$
28. Tax r 29. Fami Exam Y 30. Other Exam N N	refunds owed to you No Yes. Give specific information about them, including whyou already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settleme	State: \$_ Local: \$_ ent, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$
28. Tax r 29. Fami Exam Y 30. Other Exam N N	refunds owed to you No Yes. Give specific information about them, including who you already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settleme	State: \$_ Local: \$_ ent, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$

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Debtor 1

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31.	Interests in insurance policies Examples: Health, disability, or life insurance	e; health savings account (HSA); credit,	, homeowner's, or renter's insurance	
	√ No			
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
	, ,			\$
				\$
				\$
20	Any interest in preparty that is also you	rem company who has died		
32.	Any interest in property that is due you f If you are the beneficiary of a living trust, ex property because someone has died.		cy, or are currently entitled to receive	
	No I			
	Yes. Give specific information			\$
	L			
33.	Claims against third parties, whether or Examples: Accidents, employment disputes		a demand for payment	
	No			
	Yes. Describe each claim			\$
34.	Other contingent and unliquidated claims to set off claims	s of every nature, including countercl	aims of the debtor and rights	_
	No			
	Yes. Describe each claim			\$
35.	Any financial assets you did not already	list		
	No			
	Yes. Give specific information			\$
36.	Add the dollar value of all of your entries for Part 4. Write that number here			\$ 575.32
	ioi Fait 4. Write that number here			\$ 070.02
Pa	rt 5: Describe Any Business-R	elated Property You Own or	Have an Interest In. List any re	eal estate in Part 1.
37.	Do you own or have any legal or equitab	e interest in any business-related pro	operty?	
	No. Go to Part 6.	,		
	Yes. Go to line 38.			
				Current value of the
				portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions yo	u already earned		
	☐ No			
	☐ Yes. Describe			
				\$
39.	Office equipment, furnishings, and supp			
	Examples: Business-related computers, software,	modems, printers, copiers, fax machines, rug	gs, telephones, desks, chairs, electronic devices	
	No Proceedings			1
	Yes. Describe			\$
				1

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Debtor 1

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☐ No ☐ Yes. Describe..... 41. Inventory ☐ No ☐ Yes. Describe..... 42. Interests in partnerships or joint ventures ☐ No ☐ Yes. Describe...... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations ☐ No ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ Yes. Describe...... 44. Any business-related property you did not already list ■ No ☐ Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish ■ No ☐ Yes.....

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Debtor 1

48. Crops—either growing or harvested			
□ No			
Yes. Give specific information			\$
49. Farm and fishing equipment, implements, machinery, fixtures	and tools of trade		
☐ No	, and tools of trade		
☐ Yes			
			\$
50. Farm and fishing supplies, chemicals, and feed			
□ No			
☐ Yes			\$
	of almost by Park		Ψ
51. Any farm- and commercial fishing-related property you did no	ot aiready list		
Yes. Give specific			
information			\$
52. Add the dollar value of all of your entries from Part 6, includir for Part 6. Write that number here			\$0.00
TOI Falt 0. Write that number here			
Part 7: Describe All Property You Own or Have a	n Interest in That	You Did Not List Above	
53. Do you have other property of any kind you did not already lis	st?		
Examples: Season tickets, country club membership			
✓ No ✓ Yes. Give specific			\$
information			\$
			\$
54. Add the dollar value of all of your entries from Part 7. Write th	at number here	······	\$ <u>0.00</u>
Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2			158900.00
56. Part 2: Total vehicles, line 5	\$0.00)	
	\$ 6,500.00		
57. Part 3: Total personal and household items, line 15	Ψ575 32	_	
58. Part 4: Total financial assets, line 36	\$0.00	_	
59. Part 5: Total business-related property, line 45	Ψ	_	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7: Total other property not listed, line 54	+\$0.00	<u> </u>	
62. Total personal property. Add lines 56 through 61	\$7075.32	Copy personal property total	+ \$ 7075.32
· · · · · ·			,
63. Total of all property on Schedule A/B. Add line 55 + line 62			165975.32
os. Total of all property on schedule A/B. Add line 35 + line 62			100913.32

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Fill in this in	formation to ide	entify your case:		
Debtor 1	Hady Traore			
200101	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	or the:Eastern District of Pe	nnsylvania	•
Case number	23-12714			
(If known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Part 1: Identify the Property You Claim as Exempt				
	 Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. 				
		on of the property and line on that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
	Brief description: Line from Schedule A/B:	Principal residence 2.1	\$ <u>158900.00</u>	■ \$ 27900.00 ■ 100% of fair market value, up to any applicable statutory limit	522(d)(1)
	Brief description: Line from Schedule A/B:	Household goods 6——	\$2,000.00	\$\frac{2,000.00}{100\% of fair market value, up to any applicable statutory limit	522(d)(3)
	Brief description: Line from Schedule A/B:	Electronics 7	\$ <u>1,500.00</u>	■ \$ 1,500.00 ■ 100% of fair market value, up to any applicable statutory limit	522(d)(3)
3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) ✓ No ✓ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ✓ No ✓ Yes)	

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Debtor 1

First Name

Middle Name

Last Name

Part 2:

Additional Page

	on of the property and line /B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Clothing	\$1,500.00	☑ \$1,500.00	522(d)(3)
Line from Schedule A/B:	11		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Jewelry	\$500.00	☑ \$500.00	522(d)(4)
Line from Schedule A/B:	12		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Cash	\$100.00	= \$100.00	522(d)(5)
Line from Schedule A/B:	<u>16</u>		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Accounts	\$475.32	5 \$ 475.32	522(d)(5)
Line from Schedule A/B:	17		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:	28		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	 \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	

1 MARK A. CRONIN
CaseKM3-12-701 Market Street

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	016 0000			•
Fill in this in	formation to ide	ntify your case:		
Debtor 1	Hady Traore			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for	r the: Eastern District of Per	nnsylvania	•
Case number	23-12714			
(If known)				

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below.

Part 1: List All Secured Claims				
for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. nabetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Deutsche Bank	Describe the property that secures the claim:	\$140000.00	\$158900.00 s	S
c/o MARK A. CRONIN	7120 Guyer Ave.			
701 Market Street Ste 5000	As of the date you file, the claim is: Check all that apply.	_		
Philadelphia, PA 19106 City State ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
 ☑ Debtor 1 only ☑ Debtor 2 only ☑ Debtor 1 and Debtor 2 only ☑ At least one of the debtors and another 	 ✓ An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit 			
Check if this claim relates to a community debt	Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number	s 10,549.45	s 158900.00 s	
Creditor's Name C/O Law Dept. Number Street	7120 Guyer Ave.		ΨΨ	
1515 Arch St. 14th fl.	As of the date you file, the claim is: Check all that apply.	_		
Philadelphia PA 19107 City State ZIP Code	□ Contingent□ Unliquidated□ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	✓ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
☐ Check if this claim relates to a community debt	— Oner (including a right to onset)	_		
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in	Column A on this page. Write that number here:	\$150,549.45		

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Debtor 1 Hady Traore Document Page 14 of 30
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Part 1: Additional Page After listing any entries on this p by 2.4, and so forth.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any			
Water Revenue Bureau Creditor's Name City of Philadelphia Law Dept. Bankruptçy Group, MSB 1401 John F. Kennedy Blvd.,	Describe the property that secures the claim: 7120 Guyer Ave.	\$_5551.40				
State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed					
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred	Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) Last 4 digits of account number					
		7057.04	s 158900.00			
Water Revenue Bureau Cred®Ny®Philadelphia Law Dept Bankruptcy Group, MSB Numble 1401 John F. Kennedy Blvd. 5th Floor Philadelphia, PA 19102-1595	Pescribe the property that secures the claim: 7120 Guyer Ave. As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$ <u>7857.84</u>	\$_158900.00_	\$		
City State ZIP Code	☐ Disputed					
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred	Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) Last 4 digits of account number					
Creditor's Name Number Street	Describe the property that secures the claim:	\$	\$	\$		
City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed					
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)					
Date debt was incurred	Last 4 digits of account number					
Add the dollar value of your entries	in Column A on this page. Write that number here:	13409.24				
If this is the last page of your form, Write that number here:	add the dollar value totals from all pages.	\$_163958.69_				

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Debtor 1 Hady Traore

First Name Middle Name Last Name

Case number (if known) <u>23-12714</u>

Pa	Part 2: List Others to Be Notified for a Debt That You Already Listed						
ag yo	ency is tryin u have more	g to collect from you fo	r a debt you owe to s ny of the debts that y	omeone else, list th ou listed in Part 1, l	a debt that you already listed in Part 1. For example, if a collection e creditor in Part 1, and then list the collection agency here. Similarly, if ist the additional creditors here. If you do not have additional persons to		
					On which line in Part 1 did you enter the creditor?		
					Last 4 digits of account number		
	Number	Street			-		
					-		
				710.0	_		
	City		State	ZIP Code			
					On which line in Part 1 did you enter the creditor?		
	Name				Last 4 digits of account number		
	Number	Street			-		
	Number	Street					
					-		
	City		State	ZIP Code	-		
					On which line in Part 1 did you enter the creditor?		
	Name				Last 4 digits of account number		
					Lust 4 digits of docount number		
	Number	Street			-		
					_		
	City		State	ZIP Code			
					On which line in Part 1 did you enter the creditor?		
	Name				Last 4 digits of account number		
					_		
	Number	Street					
					-		
	City		State	ZIP Code	-		
					On which line in Part 1 did you enter the creditor?		
	Name				Last 4 digits of account number		
	Number	Street			-		
					-		
	City		State	ZIP Code	-		
					On which line in Part 1 did you enter the creditor?		
,	Name				Last 4 digits of account number		
	Number	Street			-		
					_		
					_		
	City		State	ZIP Code			

Entered 10/16/23 22:22:12 Case 23-12714-mdc Doc 14 Filed 10/16/23 Fill in this information to identify your case: Hady Traore Debtor 1 First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Eastern District of Pennsylvania ☐ Check if this is an 23-12714 amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim **Priority** Nonpriority amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another ■ Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other. Specify ☐ No Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. □ Contingent ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ■ Domestic support obligations ☐ Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated

☐ No☐ Yes

Is the claim subject to offset?

Other, Specify

Debtor 1

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er listing any entries on this page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprior amount
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply. Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify			
Is the claim subject to offset?	, ,			
□ No				
☐ Yes				
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
Miles in some data data (O.C.)	☐ Disputed			
Who incurred the debt? Check one. Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligationsTaxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
lacksquare Check if this claim is for a community debt	intoxicated Other. Specify			
Is the claim subject to offset?	Cities. Specify			
, No				
☐ Yes				
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
Who incomed the debt 2.0	☐ Disputed			
Who incurred the debt? Check one.	Type of PRIORITY unsecured eleim.			
☐ Debtor 1 only ☐ Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify			
Is the claim subject to offset?				
No				
□ NO □ Ves				

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Dart	\sim

List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority una ☐ No. You have nothing to report in thi ☑ Yes					
4.	nonpriority unsecured claim, list the cred	ditor separa litor holds	ately for each cla	al order of the creditor who holds each claim. If a creditor has aim. For each claim listed, identify what type of claim it is. Do not n, list the other creditors in Part 3.If you have more than three not	list cla	ims already
					Tota	al claim
4.1	TMobile c/o Enhanced Recove	rv		Last 4 digits of account number		
	Nonpriority Creditor's Name	<u> </u>			\$	2,299.00
	8014 Bayberry Road			When was the debt incurred?		
	Number Street Jacksonville	FL	32256			
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
				☐ Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated		
	Debtor 1 only			☐ Disputed		
	Debtor 2 only			Time of NONDRIORITY image and eleims		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Type of NONPRIORITY unsecured claim:		
	_			☐ Student loans☐ Obligations arising out of a separation agreement or divorce		
	☐ Check if this claim is for a commun	nity debt		that you did not report as priority claims		
	Is the claim subject to offset? ✓ No			 Debts to pension or profit-sharing plans, and other similar debts Other. Specify Wireless 		
	Yes			Other: Specify Whichess		
						653.00
4.2	Kohl's			Last 4 digits of account number When was the debt incurred?	\$	000.00
	Nonpriority Creditor's Name POB 3115			when was the debt incurred?		
	Number Street			_		
	Milwaukee	WI	53201	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only			☐ Disputed		
	□ Debtor 2 only□ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			☐ Student loans		
	☐ Check if this claim is for a commun	nity deht		Obligations arising out of a separation agreement or divorce		
	Is the claim subject to offset?	mry debt		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	No			Other. Specify Credit card		
	Yes					
4.3				Last 4 digits of account number		
	Nonpriority Creditor's Name			When was the debt incurred?	\$	
	Number Street			_		
				As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code			
	Who incurred the debt? Check one.			☐ Contingent ☐ Unliquidated		
	Debtor 1 only			☐ Disputed		
	Debtor 2 only			·		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Type of NONPRIORITY unsecured claim:		
	_			☐ Student loans		
	☐ Check if this claim is for a commun	nity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		
	□ No □ Yes			Other. Specify		
	00					

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Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

Afte	r listing any entries on this page, number them beginning with 4.4, f	ollowed by 4.5, and so forth.	Total claim
		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent ☐ Unliquidated	
	☐ Debtor 1 only	☐ Disputed	
	Debter 1 and Debter 2 anh	Type of NONPRIORITY unsecured claim:	
		Student loans Obligations arising out of a separation agreement or divorce that	
		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ☐ No ☐ Yes	Other. Specify	
		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
		 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
		□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify	
	□ No □ Yes		
		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent ☐ Unliquidated	
		☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debters and enotion	Student loansObligations arising out of a separation agreement or divorce that	
	Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ☐ No	Other. Specify	
	Yes		

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

Penn Credit			On which entry in Part 1 or Part 2 did you list the original creditor?
Name 916 S. 14th St.			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			□ Part 2: Creditors with Nonpriority Unsecured Claims
POB 988			Tall 2. Ordalors with Northholity Orisecuted Glaim
Harrisburg	PA	17108	Last 4 digits of account number
City	State	ZIP Code	
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number
, 			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			· _
			Part 2: Creditors with Nonpriority Unsecured Claims
Dity	State	ZIP Code	Last 4 digits of account number
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			_
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
20.			Last 4 digits of account number
City	State	ZIP Code	Outstand and the Point Ann Point Office House Control of the Contr
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	-		Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account number
City	State	ZIP Code	
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total	claims
from	Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other. Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.

Total claim

- 6a.
- 6b.
- 6d.
- 6e 0.00

Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

Total claim

- 6f.
- 6g.
- 6h.
- 2,952.00
- 2,952.00

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Fill in this in	formation to ide	entify your case:		
Debtor	Hady Traore			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse If filing)	First Name	Middle Name	Last Name	
United States		or the: Eastern District of Pen	nnsylvania	V
Case number	23-12714			
(If known)				

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with wh	om you l	have the contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	-
2.2					_
	Name				
	Number	Street			-
	City		State	ZIP Code	-
2.3					
	Name				-
	Number	Street			-
	City		State	ZIP Code	-
2.4					
	Name				
	Number	Street			-
	City		State	ZIP Code	-
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	-

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Debtor 1 Hady Traore

First Name Middle Name

Last Name

Case number (if known) 23-12714

	Ac	lditional P	age if You Ha	ve More Contracts or Lease	S
	Person or	company w	vith whom you l	nave the contract or lease	What the contract or lease is for
2. <u>2</u>					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
,	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	

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Fill in this in	formation to identify y	our case:	
Debtor 1	Hady Traore First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the: E	astern District of Pennsyl	Ivania
Case number (If known)	<u>23</u> -12714		_

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do you have any codebtors? (If you are filing a joint case, do not list to No	either spouse as a	codebtor.)
	☐ Yes		
2.	Within the last 8 years, have you lived in a community property sta Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Ric	• `	• • •
	☑ No. Go to line 3.		
	$\hfill \square$ Yes. Did your spouse, former spouse, or legal equivalent live with y	ou at the time?	
	☐ No		
	☐ Yes. In which community state or territory did you live?	Fi	Il in the name and current address of that person.
	Name of your spouse, former spouse, or legal equivalent		
	Number Street		
	City State	ZIP Code	
3.	In Column 1, list all of your codebtors. Do not include your spouse shown in line 2 again as a codebtor only if that person is a guaran Schedule D (Official Form 106D), Schedule E/F (Official Form 106E Schedule E/F, or Schedule G to fill out Column 2.	tor or cosigner. I	Make sure you have listed the creditor on
	Column 1: Your codebtor		Column 2: The creditor to whom you owe the debt
			Check all schedules that apply:
3.1			☐ Schedule D, line
			Schedule E/F, line
	Number Street		☐ Schedule G, line
2.2	City State	ZIP Code	
3.2	Name		Schedule D, line
	IVALITE		☐ Schedule E/F, line
	Number Street		Schedule G, line
	City State	ZIP Code	
3.3			
	Name		—
	Newbox		Schedule E/F, line
	Number Street		☐ Schedule G, line
	City State	ZIP Code	_
	-		

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Debtor 1

Hady Traore Middle Name Document

Last Name

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Additional Page to List More Codebtors Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: ☐ Schedule D, line ___ Name ☐ Schedule E/F, line ___ ☐ Schedule G, line ___ Number Street City ZIP Code State ☐ Schedule D, line ___ Name ☐ Schedule E/F, line ___ ☐ Schedule G, line ____ Number Street City State ZIP Code ☐ Schedule D, line ___ Name ☐ Schedule E/F, line ___ ☐ Schedule G, line ____ Number Street City State ZIP Code Schedule D, line ___ Name ☐ Schedule E/F, line ___ ☐ Schedule G, line ____ Number Street City State ZIP Code ☐ Schedule D, line ____ Name ☐ Schedule E/F, line ___ ☐ Schedule G, line ____ Number Street City State ZIP Code ☐ Schedule D, line __ Name ☐ Schedule E/F, line ___ ☐ Schedule G, line ___ Number Street City ZIP Code State ☐ Schedule D, line __ Name ☐ Schedule E/F, line ___ ☐ Schedule G, line ____ Number Street ZIP Code City State 3._ ☐ Schedule D, line ___ Name ☐ Schedule E/F, line ___ ☐ Schedule G, line _____ Number Street City State ZIP Code

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ebtor 1 Hady Traore			
First Name	Middle Name	Last Name	
pouse, if filing) First Name	Middle Name	Last Name	
nited States Bankruptcy Court for the:	Eastern District of Pennsyl	Ivania 🔻	
se number 23-12714 known)			Check if this is:
			An amended filing
			A supplement showing postpetition chapt income as of the following date:
ficial Form 106I	_		MM / DD / YYYY
chedule I: You	ur Income		12
Describe Employn	nent		
Fill in your employment			
Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
information. If you have more than one job, attach a separate page with information about additional	Employment status	Debtor 1 ☑ Employed ☑ Not employed	Debtor 2 or non-filing spouse Employed Not employed
information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or	Employment status	✓ Employed☐ Not employed	☐ Employed
information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student	Occupation	≝ Employed	☐ Employed
information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student	Occupation	☑ Employed ☐ Not employed Valet	☐ Employed
	Occupation	✓ Employed☐ Not employed	☐ Employed
information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student	Occupation	Employed Not employed Valet Park America One Bala Ave. Ste. 500	Employed Not employed
information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student	Occupation Employer's name	Employed Not employed Valet Park America	☐ Employed ☑ Not employed
information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student	Occupation Employer's name	Employed Not employed Valet Park America One Bala Ave. Ste. 500 Number Street	Employed Not employed Number Street
information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student	Occupation Employer's name	Employed Not employed Valet Park America One Bala Ave. Ste. 500 Number Street Bala Cynwyd PA	Employed Not employed
information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student	Occupation Employer's name	Employed Not employed Valet Park America One Bala Ave. Ste. 500 Number Street Bala Cynwyd PA City State ZIF	Employed Not employed Number Street

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
 Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

	For Debtor 1	non-filing spouse			
2.	\$_2,078.43	\$			
3.	+\$	+ \$			
4.	_{\$} 2,078.43	\$			

Official Form 106l Schedule I: Your Income page 1

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Debtor 1

Hady Traore

t Name	Middle Name	Last Name

Case number (*if known*) 23-12714_

			Fo	r Debtor 1	For Debtor 2 or non-filing spouse	
Co	ppy line 4 here	4.	\$_	2,078.43	\$	
5. Lis	st all payroll deductions:					
5	a. Tax, Medicare, and Social Security deductions	5a.	\$	470.66	\$	
	b. Mandatory contributions for retirement plans	5b.	\$			
	c. Voluntary contributions for retirement plans	5c.	\$		\$ \$	
	d. Required repayments of retirement fund loans	5d.	\$_ \$		\$	
	e. Insurance	5e.	Ψ_		Ψ	
		5f.	Ψ_ \$		\$	
	f. Domestic support obligations		Φ_			
	g. Union dues	5g.	Φ_		\$	
5	h. Other deductions. Specify:	5h.	+\$_		+ \$	
6. A	add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$_	470.66	\$	
7. C	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,607.77	\$	
8. Li	st all other income regularly received:					
8	 Net income from rental property and from operating a business, profession, or farm 					
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_		\$	
ç	Bb. Interest and dividends	8b.	\$		\$	
	c. Family support payments that you, a non-filing spouse, or a depende regularly receive		Φ		Ψ	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	750.00	\$	
8	d. Unemployment compensation	8d.	\$_		\$	
	Be. Social Security	8e.	\$_		\$	
8	If. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	ice 8f.	\$_		\$	
c	g. Pension or retirement income	0.0	Φ.		r.	
		8g.	Φ_		Φ	
8	th. Other monthly income. Specify:	8h.	+\$_	947.83	+\$	
9. A	dd all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	1,697.83	\$	
	alculate monthly income. Add line 7 + line 9. dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10	. \$_	3,305.60	+ \$	= \$3,305.60
In	tate all other regular contributions to the expenses that you list in Scheoliculate contributions from an unmarried partner, members of your household, yends or relatives.			lents, your roo	ommates, and other	
D	o not include any amounts already included in lines 2-10 or amounts that are	not a	vailabl	e to pay expe	nses listed in Schedule J.	
S	pecify:				11. •	+ \$
	dd the amount in the last column of line 10 to the amount in line 11. The rite that amount on the Summary of Your Assets and Liabilities and Certain S				•	\$3,305.60
	o you expect an increase or decrease within the year after you file this f	form'	?			Combined monthly income
	☑ No. ☑ Yes. Explain:					

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Fill in this information to identify your case:			
Debtor 1 Hady Traore	Check if this is		
First Name Middle Name Last Name Debtor 2	———— An amende		
(Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Eastern District of Pennsylvania	☐ A suppleme	ent showing postp	petition chapter 13
Case number 23-12714	expenses a	as of the following	date:
(If known)	MM / DD / Y	YYY	
Official Form 106J			
Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married people are fili information. If more space is needed, attach another sheet to this form (if known). Answer every question.			
Part 1: Describe Your Household			
1. Is this a joint case?			
✓ No. Go to line 2.☐ Yes. Does Debtor 2 live in a separate household?			
☐ No			
Yes. Debtor 2 must file Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
 2. Do you have dependents? Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent 	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	Child	14	□ No ☑ Yes
numos.	Child	12	□ No ☑ Yes
	Child	8	☐ No
	Crilia	.0	☑ Yes
			☐ No ☐ Yes
			☐ No
			☐ Yes
 Do your expenses include expenses of people other than yourself and your dependents? Ves			
Part 2: Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you a	are using this form as a supplemen	t in a Chapter 13 c	ase to report
expenses as of a date after the bankruptcy is filed. If this is a supplem applicable date.	ental <i>Schedule J</i> , check the box at	the top of the form	and fill in the
Include expenses paid for with non-cash government assistance if you such assistance and have included it on Schedule I: Your Income (Offi		Your expe	nses
 The rental or home ownership expenses for your residence. Include any rent for the ground or lot. 		4. \$	530.37
If not included in line 4:			
4a. Real estate taxes		4a. \$	
4b. Property, homeowner's, or renter's insurance		4b. \$	
4c. Home maintenance, repair, and upkeep expenses		4c. \$	

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Debtor 1 Hady T

Hady Traore
First Name Middle Name

Last Name

Case number (if known)_23-12714_

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$150.00
	6b. Water, sewer, garbage collection	6b.	\$35.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$150.00
	6d. Other. Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$1000.00
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$100.00
10.	Personal care products and services	10.	\$100.00
11.	Medical and dental expenses	11.	\$100.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$200.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$200.00
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$500.00
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$
			Ψ
19.	Other payments you make to support others who do not live with you. Specify:	19.	\$
20			*
∠0.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		\$
	20a. Mortgages on other property	20a.	
	20b. Real estate taxes	20b.	\$ ¢
	20c. Property, homeowner's, or renter's insurance	20c.	\$ ¢
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

ebtor 1	Hady Traore First Name Middle Name Last Nam	(Case number (if known)_23-	12714
Other. S	pecify:		21.	+\$
Calculate	e your monthly expenses.			
22a. Add	lines 4 through 21.		22a.	\$2,965.37
22b. Cop	y line 22 (monthly expenses for Debtor 2	e), if any, from Official Form 106J-2	22b.	\$
22c. Add	line 22a and 22b. The result is your mor	othly expenses.	22c.	\$
Calculate	your monthly net income.			2 205 62
23a. Cop	y line 12 (your combined monthly incom	e) from Schedule I.	23a.	\$3,305.60
23b. Cop	y your monthly expenses from line 22c a	above.	23b.	-\$3,065.37
23c. Sub	tract your monthly expenses from your r	nonthly income.		\$ 240.23
The	result is your monthly net income.		23c.	\$
. Do you e	spect an increase or decrease in your	expenses within the year after you file	e this form?	
		ur car loan within the year or do you expose of a modification to the terms of your		
✓ No.	payment to increase or decrease because	se of a modification to the terms of your f	mongago.	
Yes.	Explain here:			